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Case 09-35920 Duc 3 Filed 09/28/08	9 Entered 09/28/09 16:00:53 Descrivant
Document .	Page 1 of 8
B22A (Official Form 22A) (Chapter 7) (12/08)	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):
	☐ The presumption arises
In re: Kwan, Christopher	<b>▼</b> The presumption does not arise
Debtor(s)	☐ The presumption is temporarily inapplicable.
Case Number:	
(If known)	

## CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	<b>Disabled Veterans.</b> If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
IA	□ <b>Veteran's Declaration.</b> By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	<b>Non-consumer Debtors.</b> If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	☐ <b>Declaration of non-consumer debts.</b> By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	☐ <b>Declaration of Reservists and National Guard Members.</b> By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a.   I was called to active duty after September 11, 2001, for a period of at least 90 days and  I remain on active duty /or/  I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	b.   I am performing homeland defense activity for a period of at least 90 days /or/  I performed homeland defense activity for a period of at least 90 days, terminating on,  which is less than 540 days before this bankruptcy case was filed.

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	Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION								
	Marital/filing status. Check the box that applies and complete the balance of this part of the							ected.	
	a. V Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.								
	b. Married, not filing jointly, with declaration of separate households. By checking this be penalty of perjury: "My spouse and I are legally separated under applicable non-banks are living apart other than for the purpose of evading the requirements of § 707(b)(2)(Complete only Column A ("Debtor's Income") for Lines 3-11.						cruptcy law or my spouse and I		
2	c. [	Married, not filing jointly, without Column A ("Debtor's Income")					above. Con	plete both	
	d. [	Married, filing jointly. <b>Complete Lines 3-11.</b>	ooth Column A	A ("Debtor	's Income'') and Column	B ("	Spouse's In	come") for	
	the si	igures must reflect average monthly ix calendar months prior to filing the holds before the filing. If the amount of divide the six-month total by six, as	e bankruptcy ca monthly incon	ase, ending ne varied di	on the last day of the uring the six months, you	]	Column A Debtor's Income	Column B Spouse's Income	
3	Gros	ss wages, salary, tips, bonuses, ove	ertime, commi	ssions.		\$	1,866.76	\$	
4	Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.								
т	a.	Gross receipts		\$					
	b.	Ordinary and necessary business e	expenses	\$					
	c.	Business income		Subtract I	Line b from Line a	\$	0.00	\$	
_	Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.								
5	a.	Gross receipts		\$					
	b.	Ordinary and necessary operating	expenses	\$					
	c.	Rent and other real property incor	ne	Subtract I	ine b from Line a	\$	0.00	\$	
6	Inter	rest, dividends, and royalties.				\$	0.00	\$	
7	Pens	ion and retirement income.				\$	0.00	\$	
8	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.					\$	0.00	\$	
9	How was a Colu	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:							
	Unemployment compensation claimed to be a benefit under the Social Security Act  Debtor \$ 0.00 Spouse \$					Φ.	0.00	¢.	

0.00 \$

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10	Income from all other sources. Specify source and amount. If necessary, is sources on a separate page. Do not include alimony or separate maintenar paid by your spouse if Column B is completed, but include all other pay alimony or separate maintenance. Do not include any benefits received us Security Act or payments received as a victim of a war crime, crime against a victim of international or domestic terrorism.						
	a.	\$					
	b.   Total and enter on Line 10	\$	\$	0.00	•		
11	Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 1 and, if Column B is completed, add Lines 3 through 10 in Column B. Enter		'	66.76	7		
12	Total Current Monthly Income for § 707(b)(7). If Column B has been co Line 11, Column A to Line 11, Column B, and enter the total. If Column B completed, enter the amount from Line 11, Column A.	mpleted, add	\$	-	Ψ	1,866.76	
	Part III. APPLICATION OF § 707(B)(7) EXCLUSION						
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.						
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)						
	a. Enter debtor's state of residence: Illinois b. Enter	r debtor's househ	old size: _	1 :	\$	47,355.00	
	<b>Application of Section707(b)(7).</b> Check the applicable box and proceed as						
15	The amount on Line 13 is less than or equal to the amount on Line not arise" at the top of page 1 of this statement, and complete Part VIII;	<b>14.</b> Check the box do not complete l	for "The parts IV, V	presun 7, VI,	nptic or V	on does II.	
	☐ The amount on Line 13 is more than the amount on Line 14. Compl	ete the remaining	parts of th	is state	emer	ıt.	

## Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)							
16	Ente	r the amount from Line 12.	\$				
17	Line debto paym debto	<b>ital adjustment.</b> If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the or's dependents. Specify in the lines below the basis for excluding the Column B income (such as nent of the spouse's tax liability or the spouse's support of persons other than the debtor or the or's dependents) and the amount of income devoted to each purpose. If necessary, list additional tements on a separate page. If you did not check box at Line 2.c, enter zero.					
	a.	\$					
	b.	\$					
	c.	\$					
	Tot	al and enter on Line 17.	\$				
18 Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.							
		Part V. CALCULATION OF DEDUCTIONS FROM INCOME					
		Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)					
19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)						

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19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.							
	Household members under 65 years of age			Household members 65 years of age or older				
	a1.	Allowance per member		a2.	Allowance p	per member		
	b1.	Number of members		b2.	Number of 1	nembers		
	c1.	Subtotal		c2.	Subtotal			\$
20A	and U	l Standards: housing and util Utilities Standards; non-mortgag mation is available at www.usd	ge expenses for th	e appli	cable county a	and household si		\$
	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and family size (this information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.							
20B	a. IRS Housing and Utilities Standards; mortgage/rental expense					\$		
	b.	Average Monthly Payment for any, as stated in Line 42	r any debts secure	d by y	our home, if	\$		
	c.	Net mortgage/rental expense		Subtract Line l	o from Line a	\$		
21	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:							
	T	1540-10-10-10-10-10-10-10-10-10-10-10-10-10		. / ls 15	4	V		\$
	Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.							
22A	expe	k the number of vehicles for whoses are included as a contribute					perating	
	☐ 0 ☐ 1 ☐ 2 or more.  If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)							\$
22B	experaddit Trans	al Standards: transportation; nses for a vehicle and also use pional deduction for your public sportation" amount from IRS Le	public transportati transportation ex ocal Standards: Tr	on, and penses ranspo	d you contend , enter on Line rtation. (This a	that you are enti	tled to an	
	www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)							\$

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23	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  1 2 or more.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards:  Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.								
	<ul> <li>a. IRS Transportation Standards, Ownership Costs</li> <li>Average Monthly Payment for any debts secured by Vehicle 1, as</li> <li>b. stated in Line 42</li> <li>c. Net ownership/lease expense for Vehicle 1</li> </ul>	\$ \$ Subtract Line b from Line a							
24	Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards:  Transportation (available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.								
	<ul> <li>a. IRS Transportation Standards, Ownership Costs, Second Car</li> <li>Average Monthly Payment for any debts secured by Vehicle 2, as</li> <li>b. stated in Line 42</li> <li>c. Net ownership/lease expense for Vehicle 2</li> </ul>	\$ Subtract Line b from Line a	\$						
25	Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.								
26	Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly								
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.								
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.								
29	employment and for education that is required for a physically or mentally challenged dependent child for								
30	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend								
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.								
32	Other Necessary Expenses: telecommunication services. Enter the total you actually pay for telecommunication services other than your basic hom service — such as pagers, call waiting, caller id, special long distance, or in necessary for your health and welfare or that of your dependents. Do not in deducted.	ne telephone and cell phone nternet service — to the extent	\$						
33	<b>Total Expenses Allowed under IRS Standards.</b> Enter the total of Lines 19 through 32.								

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		Subpart B: Additional Living E Note: Do not include any expenses that y		32	
	expe	Ith Insurance, Disability Insurance, and Health Savings Anses in the categories set out in lines a-c below that are reasonse, or your dependents.			
	a.	Health Insurance	\$		
2.4	b.	Disability Insurance	\$		
34	c.	Health Savings Account	\$		
	Total	l and enter on Line 34			\$
		ou do not actually expend this total amount, state your actually expend this total amount.	nal total average monthly ex	penditures in	
35	mont elder	tinued contributions to the care of household or family methly expenses that you will continue to pay for the reasonable ly, chronically ill, or disabled member of your household or le to pay for such expenses.	and necessary care and sup	port of an	\$
36	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.				
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.				
38	you a secon trust	cation expenses for dependent children less than 18. Enter actually incur, not to exceed \$137.50 per child, for attendance and are school by your dependent children less than 18 years of the with documentation of your actual expenses, and you asonable and necessary and not already accounted for in	e at a private or public elem f age. You must provide yo must explain why the amo	entary or our case	\$
39	cloth Natio	itional food and clothing expense. Enter the total average naming expenses exceed the combined allowances for food and conal Standards, not to exceed 5% of those combined allowance. V.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Y tional amount claimed is reasonable and necessary.	clothing (apparel and service ces. (This information is available)	es) in the IRS ailable at	\$
40		tinued charitable contributions. Enter the amount that you or financial instruments to a charitable organization as defin			\$
41	Tota	al Additional Expense Deductions under § 707(b). Enter th	e total of Lines 34 through 4	40	Ф

\$

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	Subpart C: Deductions for Debt Payment								
	<b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.								
42		Name of Creditor	Property	Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?			
	a.				\$	☐ yes ☐ no			
	b.				\$	☐ yes ☐ no			
	c.			T-4-1- A 1	11: 1	yes no			
				1 otar: Ad	d lines a, b and c.		\$		
	Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page.								
43	Name of Creditor		Property Securing the Debt		1/60th of the Cure Amount				
	a.					\$			
	b.					\$			
	c.				T . 1 . 1 . 1	\$			
					Total: Add	l lines a, b and c.	\$		
44	such	nents on prepetition priority cl as priority tax, child support and ruptcy filing. Do not include cu	l alimony o	claims, for which you	were liable at the tir	ne of your	\$		
	follo	oter 13 administrative expenses wing chart, multiply the amount in instrative expense.							
	a.	Projected average monthly cha	pter 13 pla	an payment.	\$				
45	b.	Current multiplier for your dist schedules issued by the Execut Trustees. (This information is a <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the court.)	ecutive Office for United States is available at		X				
	c.	Average monthly administrative case	e expense	of chapter 13	Total: Multiply Line and b	es a	\$		
46	Tota	l Deductions for Debt Payment	t. Enter the	e total of Lines 42 th	rough 45.		\$		
		S	ubpart D	: Total Deductions f	rom Income				

Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.

\$

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`	Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION							
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))		\$					
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))		\$					
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the	result.	\$					
51	<b>60-month disposable income under § 707(b)(2).</b> Multiply the amount in Line 50 by the numenter the result.	ber 60 and	\$					
	Initial presumption determination. Check the applicable box and proceed as directed.							
	☐ The amount on Line 51 is less than \$6,575. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.							
52	☐ The amount set forth on Line 51 is more than \$10,950. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.							
	☐ The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the rethough 55).	mainder of Par	t VI (Liı	nes 53				
53	Enter the amount of your total non-priority unsecured debt		\$					
54	<b>Threshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and enter the result.							
	Secondary presumption determination. Check the applicable box and proceed as directed.							
55	The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not the top of page 1 of this statement, and complete the verification in Part VIII.							
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You VII.							
	Part VII. ADDITIONAL EXPENSE CLAIMS							
	<b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, the and welfare of you and your family and that you contend should be an additional deduction from under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All average monthly expense for each item. Total the expenses.	om your curren	t month	ly				
	Expense Description	Monthly A	mount					
56	a.	\$						
	b.	\$						
	c.	\$						
	Total: Add Lines a, b and c	\$						
	Part VIII. VERIFICATION							
	I declare under penalty of perjury that the information provided in this statement is true and contain the both debtors must sign.)	orrect. (If this a	i joint ca	ise,				
57	Date: September 28, 2009 Signature: /s/ Christopher Kwan							
	(Debtor)							
	Date: Signature: (Joint Debtor, if any)							